

## "FEE ADDRESS" INDICATION FORM

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**INSTRUCTIONS:** The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. **When to check the first box below:** If you have a Customer Number to represent the fee address. **When to check the second box below:** If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.

For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:

☒ Customer Number: **88670**

OR

☐ The attached Request for Customer Number (PTO/SB/125) form.

PATENT NUMBER (if known)	APPLICATION NUMBER
7,279,168	09/303,040
<p>Completed by (check one):</p> <p><input type="checkbox"/> Applicant/Inventor</p> <p><input type="checkbox"/> Attorney or Agent of record _____ (Reg. No.)</p> <p><input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> Assignee recorded at Reel <u>015392, Frame 0494</u></p>	<p style="text-align: center;"><i>Dr. Peter Schuerman</i> Signature</p> <p style="text-align: center;">_____ Dr. Peter Schuerman Typed or Printed Name</p> <p style="text-align: center;">979-847-8642 Requestor's telephone number</p> <p style="text-align: center;"><u>312412010</u> Date</p>
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>	
<p><input checked="" type="checkbox"/> * Total of 2 forms are submitted.</p>	

This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<b>CHANGE OF CORRESPONDENCE ADDRESS Patent</b>  Address to: Mail Stop Post Issue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	<b>Patent Number</b>	<b>7,279,168</b>
	<b>Issue Date</b>	<b>October 9, 2007</b>
	<b>Application Number</b>	<b>09/303,040</b>
	<b>Filing Date</b>	<b>April 30, 1999</b>
	<b>First Named Inventor Title</b>	<b>Barbara J. Winslow Recombinant Virus Expressing Foreign DNA Encoding Feline CD80, Feline CD86, Feline CD28, Or Feline CTLA-4 And Uses Thereof</b>
	<b>Art Unit</b>	<b>1648</b>
	<b>Examiner Name</b>	<b>Sharon L. HURT</b>
	<b>Attorney Docket Number</b>	<b>2976-4055US2</b>

Please change the Correspondence Address for the above-identified application to:

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**88670**

OR

☐ Firm or Individual Name **LOEB & LOEB LLP**

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I am the:

- ☐ Patentee.
- ☒ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- ☐ Attorney or agent of record. Registration Number \_\_\_\_\_

Signature

Date

Name

**Dr. Peter Schuerman**

Telephone

**979-847-8642**

Title and Company

**Director, Licensing & Intellectual Property, The Texas A&M University System**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to the (and by the USPTO) to process an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing the burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 4600, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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